

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.  
Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

## Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (225) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

Lobbyist's Registration Number

### FOR OFFICE USE ONLY

Postmark Date: 5-17-99

Reg.

**1990960**

# 739  
# 109  
KSD

99 MAY 18 PM 2:08

ETHICS  
CLERK

1. NAME Arnette Leigh E  
Last First MI

2. BUSINESS PHONE (225) 383-4580  
Area Code and Phone Number

3. BUSINESS ADDRESS 2569 Lydia Ave. #5 Baton Rouge La 70809  
Street and No. City State Zip

4. EMPLOYER Self

5. EMPLOYER'S ADDRESS 2569 Lydia Ave. #5 Baton Rouge La 70809  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name TMC Tarboro General Medical Center

Address 816 Main St. Houma 70360

Business or purpose Health

Does this person pay you? No

If No, who pays you? No one right now

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

# LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
5. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

State of Louisiana

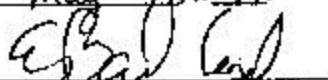
Parish of East Baton Rouge

Before me, the undersigned authority, personally came and appeared Leigh Arnette, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

  
Signature of Lobbyist

Sworn to and subscribed before me on this 17 day of

May, 1999.

  
Notary Public

Rev. 8/97

DON'T DRINK AND DRIVE  
DON'T LIE IN LOUISIANA

